

POSITION	ID NO.	DATE
CLASSIFIER	48	12/11/96
EXAMINER	319	1-6-97
TYPIST	319	1-6-97
VERIFIER	319	1-6-97
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final Original	
1	9/11/96
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- N Restricted
- I Non-elected
- A Interference
- O Appeal
- Objected

Claim	Date
Final Original	
51	
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